FORM D



UNITED STATES JRITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D



NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR NIFORM LIMITED OFFERING EXEMPTION **OMB APPROVAL**

OMB Number: 3235-0076 **Expires: May 31, 2005** Estimated average burden hours per form.....1

SEC US	E ONLY
Prefix	Serial
DATE RE	CEIVED

Name of Offering (☐ check if this is an a	mendment and name has chan	ged, a	nd indicate change.)				
Issuance of Warrant Pursuant to Bridge Lo	oan					·	
Filing Under (Check box(es) that apply):	☐ Rule 504		Rule 505	☑ Rule 506		☐ Section 4(6)	☐ ULOE
Type of Filing:		\square	New Filing			Amendment	
	A. BAS	SIC ID	ENTIFICATION D	ATA			
1. Enter the information requested about	t the issuer		· · · · · · · · · · · · · · · · · · ·				PROCESSED
Name of Issuer (check if this is an ame	ndment and name has change	d, and	indicate change.)			4	
Voyager Systems, Inc.						· (AUG 2 3 2002
Address of Executive Offices	(Number and S	treet,	City, State, Zip Code)) Telephone Nur	nber (ncluding Area Code	
9860 Mesa Rim Road, San Diego, CA 92121 858/799-7000						THOMSON	
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)			Telephone Nur	nber (l	ncluding Area Code	FINANCIAL	
Brief Description of Business Software Developer		<u></u>					
Type of Business Organization	·						
☑ corporation	☐ limited partnership, alrea	dy fori	ned			other (please specif	y):
☐ business trust	☐ limited partnership, to be	forme	d				
Actual or Estimated Date of Incorporation	or Organization:	Ŋ	Month 3	<u>Year</u> 2001	Ø	Actual	☐ Estimated
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada; FN for other foreign jurisdiction) DE							

GENERAL INSTRUCTIONS

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
 - Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	☐ Promoter	Beneficial Owner	☑ Executive Officer	☑ Director	General and/or Managing Partner
Full Name (Last Maloney, Christ	name first, if individual) opher D.				
	idence Address (Number and Road, San Diego, CA 92121	Street, City, State, Zip Code)			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last McEwen, Sean I	name first, if individual)				
	idence Address (Number and S	Street, City, State, Zip Code)			
9860 Mesa Rim	Road, San Diego, CA 92121				
Check Boxes that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner
Eckert, John B.	name first, if individual)				
	idence Address (Number and S Road, San Diego, CA 92121	Street, City, State, Zip Code)			
Check Boxes that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last Crosby, Richard	name first, if individual) J.				
	idence Address (Number and S Road, San Diego, CA 92121	Street, City, State, Zip Code)			
Check Boxes that Apply:	☐ Promoter	☐ Beneficial Owner	☑ Executive Officer	☐ Director	☐ General and/or Managing Partner
Serrio, Mark T.	name first, if individual)				
	idence Address (Number and S Road, San Diego, CA 92121	Street, City, State, Zip Code)			
Check Boxes that Apply:	☐ Promoter	☐ Beneficial Owner	☑ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last Lines, John	name first, if individual)				
	idence Address (Number and S Road, San Diego, CA 92121	Street, City, State, Zip Code)			
Check Boxes that Apply:	☐ Promoter	☑ Beneficial Owner	☐ Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last TriTech Softwar	name first, if individual) e Systems				
	idence Address (Number and S Road, San Diego, CA 92121	Street, City, State, Zip Code)			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last	name first, if individual)				
Business or Res	idence Address (Number and	Street, City, State, Zip Code)			

348357 v1/SD 2 of 6

_	٠.				В	. INFORM	ATION AB	OUT OFFE	RING				
1.	Has the	issuer sold, or	r does the issu	uer intend to				_	under ULOF			Yes	No <u>X</u>
2.	What is	the minimum	investment t	hat will be a	ccepted from	m any indivi	dual?	***************	***************************************		************	\$ <u>N/A</u>	
3.	Does th	e offering perr	nit joint own	ership of a si	ngle unit?							Yes	No X
4.	solicita register	tion of purcha	sers in conne C and/or wit	ection with . h a state or s	sales of sec tates, list th	curities in the	ne offering. he broker or	If a person	to be listed	is an associat	ed person or	agent of	remuneration for a broker or dealer persons of such a
Fui	ll Name (I	ast name first	, if individua	1)		·							
		Residence Add		r and Street,	City, State,	Zip Code)							
Na	me of Ass	sociated Broke	r or Dealer										
		ich Person Lis States" or chec											All States
[Al	LĮ	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	{ID}
IIL	}	IINI	ĮΙΑĮ	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
ĮΜ	T	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	INCI	[ND]	[OH]	[OK]	[OR]	[PA]
[RI Ful		[SC] _ast name first	SD . if individua	[TN]	[TX]	[UT]	[VT]	[VA]	[VA]	[WV]	[WI]	[WY]	[PR]
		Residence Ado			City, State,	Zip Code)							·
Na	me of Ass	sociated Broke	r or Dealer	<u> </u>	_ 	,							
Sta	ites in Wh	ich Person Lis	ted Has Solic	ited or Inten	ds to Solici	t Purchasers							
(Cl	neck "All	States" or chee	ck individual	States)	•••••	***************************************		••••		•••••	••••••		All States
[A]	LI	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	(FL)	[GA]	[HI]	{ID}
JIL	.]	JINJ	JIAJ	[KS]	[KY]	ĮLAJ	JMEJ	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[M	Tį	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI		[SC]	[SD]	[TN]	TX	[UT]	[VT]	[VA]	[VA]	[WV]	ĮWI]	[WY]	[PR]
Fui	II Name (I	Last name first	, if individua	1)					_				
Bu	siness or	Residence Ado	iress (Numbe	r and Street,	City, State	, Zip Code)							

..... 🗖 All States

[HI]

[MS]

[OR]

[WY]

[GA]

[MN]

[OK]

[WI]

[DC]

[MA]

[ND]

[VA]

[DE]

[MD]

[NC]

[VA]

[FL]

[MI]

[OH]

[WV]

JIDI

[MO]

[PA]

[PR]

348357 v1/SD 3 of 6

States in Which Person Listed Has Solicited or Intends to Solicit Purchasers

|AZ|

[IA]

[NV]

[SD]

[AL]

[IL]

[MT]

[RI]

 $\{AK\}$

IN

[NE]

[SC]

(Check "All States" or check individual States).....

[AR]

[KS]

[NH]

[TN]

[CO]

[LA]

[NM]

[UT]

[CA]

[KY]

[NJ]

[TX]

{CT}

[ME]

[NY]

[VT]

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box 🗖 and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Type of Security Aggregate Amount Already Offering Price Sold Debt Equity Preferred Common Convertible Securities (including warrants)..... \$ 300,000 \$ 300,000 Partnership Interests Other (Specify _____) Total..... \$ 300,000 \$ 300,000 Answer also in Appendix, Column 3, if filing under ULOE. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Number Aggregate Investors Dollar Amount of Purchases Accredited Investors \$ 300,000 Non-accredited Investors Total (for filings under Rule 504 only) Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1. Type of Dollar Amount Security Sold

ype of Offering	
Rule 505	 \$
Regulation A	 \$
Rule 504	 \$
Total	 \$
a statement of all expenses in connection with the issuance and distribution of the	
his offering. Exclude amounts relating solely to organization expenses of the issuer. The	
nay be given as subject to future contingencies. If the amount of an expenditure is not	

a. Furnish securities in the information n known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees

Printing and Engraving Costs		\$
Legal Fees	☑	\$ 1,000
Accounting Fees		\$
Engineering Fees		\$
Sales Commissions (specify finders' fees separately)		\$
Other Expenses (Identify)		\$
Total	Ø	\$ 1,000

348357 v1/SD 4 of 6

C. OFFERING PRICE, NUMBER OF	INVESTORS, EXPENSES ANI	USE OF PROCEEDS	
 Enter the difference between the aggregate offering price given in r in response to Part C – Question 4.a. This difference is the "adjuste 	esponse to Part C - Question 1 ard gross proceeds to the issuer"	nd total expenses furnished	\$ 299,000
5. Indicate below the amount of the adjusted gross proceeds to the issuer of the amount for any purpose is not known, furnish an estimate and payments listed must equal the adjusted gross proceeds to the issuer set	check the box to the left of the	estimate. The total of the	Payment To
		Directors, & Affiliates	Others
Salaries and fees		□ \$	□ \$
Purchase of real estate		□ \$	□ \$
Purchase, rental or leasing and installation of machinery and equipment		\$	□ \$
Construction or leasing of plant buildings and facilities		□ \$	□ \$
Acquisition of other businesses (including the value of securities involved in in exchange for the assets or securities of another issuer pursuant to a merger)	this offering that may be used	□ s	□ s
Repayment of indebtedness		□ s	□ s
Working capital		□ s	☑ \$ <u>299,000</u>
Other (specify):		□ s	□ s
		□ s	□ s
Column Totals		□ s	
Total Payments Listed (column totals added)		☑ \$ 299,000	
			
D. FED	DERAL SIGNATURE		
The issuer had duly caused this notice to be signed by the undersigned duly an undertaking by the issuer to furnish to the U.S. Securities and Exchange (non-accredited investor pursuant to paragraph (b)(2) of Rule 502.			
Issuer (Print or Type)	Signature		Date 14
Voyager Systems, Inc.			August 17, 2002
Name of Signer (Print or Type)	Title of Signer (Print or Type)		
John Lines	Secretary and Chief Developme	ent Officer	
			
	ATTENTION		

348357 v1/SD